

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS  | ID NO. | DATE    |
|---------------------------|-----------|--------|---------|
| FEE DETERMINATION         | <i>TH</i> |        | 5/14/01 |
| O.I.P.E. CLASSIFIER       |           | 21     | 7/26/01 |
| FORMALITY REVIEW          | TH        | 1118   | 8-24-01 |
| RESPONSE FORMALITY REVIEW |           |        |         |

811-2C

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)

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